

DMH Community Mental Health Stakeholder Regional Meeting



Stakeholder Summer
August 8, 2011
2:00pm–5:00pm
Chico, California

CALIFORNIA DEPARTMENT OF
Mental Health

Welcome and Introductions

Anne Robin, MFT
Director
Butte County
Department of Behavioral Health

Welcome and Introductions

Cliff Allenby

Acting Director

Department of Mental Health

Acknowledgements

- DMH would like to thank our partners:
 - Mental Health Services Oversight and Accountability Commission (MHSOAC)
 - California Mental Health Directors Association (CMHDA)
 - California Mental Health Planning Council (CMHPC)
 - CA Department of Alcohol and Drug Programs (ADP)
 - CA Department of Health Care Services (DHCS)
 - CA Network of Mental Health Clients (CNMHC)
 - National Alliance for the Mentally Ill, California (NAMI CA)
 - United Advocates for Children and Families (UACF)
 - Racial & Ethnic Mental Health Disparities Coalition (REMHDCA)
 - CA Association of Local Mental Health Boards and Commissions (CALMHBC)
 - California Institute for Mental Health (CIMH)
 - Workforce Education & Training Regional Partnerships
 - Local Partners

Facilitator for Today's Meeting

- Eileen Jacobowitz
EJC Consulting

Overview of Today's Meeting

- Welcome and Introductions
- Meeting Overview
- Background and Context
- Stakeholder Reflections
- Small Group Break-Outs
- Small Group Summary
- Next Steps

Language Access

- DMH is committed to improving language access for Limited English Proficient (LEP) and monolingual stakeholders. For each statewide and regional meeting, DMH will provide:
 - Translation of Written Materials
 - Interpreter Services

Language Access

- DMH Information Notice No.: 11-07
Current Information Notice identifying threshold languages in California
- “Threshold Language” means a language that has been identified as the primary language, as indicated on the Medi-Cal Eligibility Data System (MEDS), of 3,000 beneficiaries or five percent of the beneficiary population, whichever is lower, in an identified geographic area, per Title 9, CCR, Section 1810.410 (a) (3).

Goals of the Community Mental Health Stakeholder Meetings

- Create fully-inclusive stakeholder participation process
- Communicate clearly about current state DMH re-organization
- Educate stakeholders about the role, responsibilities and resources for the DMH
- Support efficiency and effectiveness for the community mental health system
- Develop a summary report in time for Governor's Budget consideration

Purpose of the Community Mental Health Stakeholder Meetings

- Gather stakeholder input on future functions and program responsibilities
- Determine appropriate organizational placement of functions
- Define Community Mental Health roles/responsibilities

Stakeholder Process and Design

- **Elements of the Process**
 - Planning & Design in Collaboration with: ADP, DHCS, MHSOAC, CMHPC, DMH OMS, CNMHC, NAMI CA, UACF, CMHDA, CIMH, WET Regional Partnerships
 - Pre-Meeting Education Prior to All Meetings
 - Regional Meetings Throughout the State
 - Statewide Webinar to Review Summary of Stakeholder Input
 - Monthly Stakeholder Meetings from October 2011–July 2012

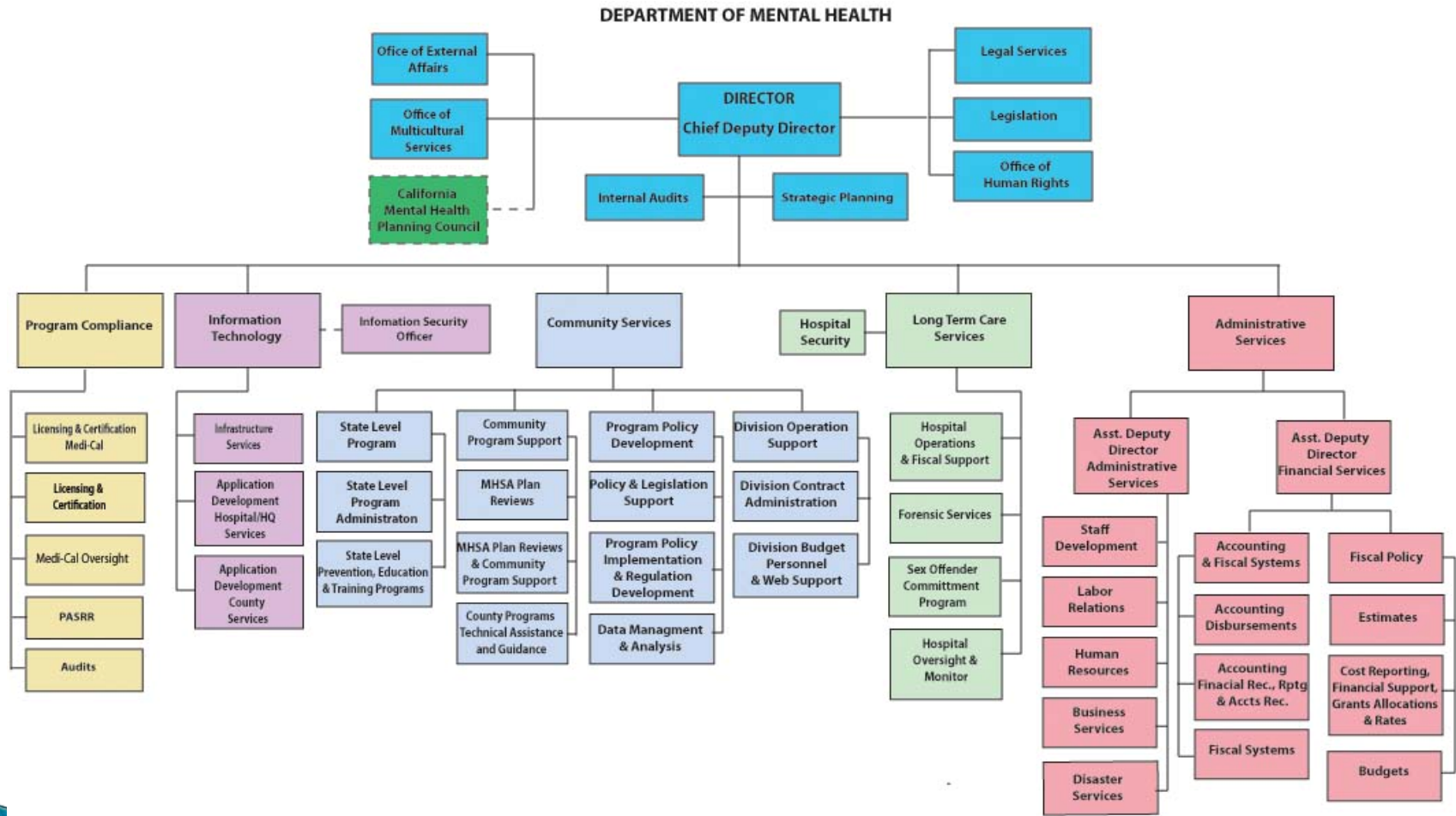
Community Mental Health Stakeholder Meeting Schedule

Stakeholder Summer 2011

Date	Activity
Tuesday August 2, 2011	Kick-Off Stakeholder Meeting Sacramento
Monday August 8, 2011	Regional Stakeholder Meeting Chico
Friday August 12, 2011	Regional Stakeholder Meeting Napa
Tuesday August 16, 2011	Regional Stakeholder Meeting Fresno
Thursday August 18, 2011	NAMI Conference Sacramento
Thursday August 25, 2011	Regional Stakeholder Meeting Los Angeles
Friday August 26, 2011	Regional Stakeholder Meeting Ontario
Thursday September 1, 2011	Regional Stakeholder Meeting San Luis Obispo
Wednesday September 7, 2011	CHHS/DMH/DHCS/ADP Stakeholder and Interest Groups Check-in Sacramento
Friday September 16, 2011	Statewide Webinar to share stakeholder input from all sessions Sacramento
October 2011- July 2012	DMH will sponsor monthly stakeholder community services education and update meetings

Background and Context

Department of Mental Health Prior to AB100



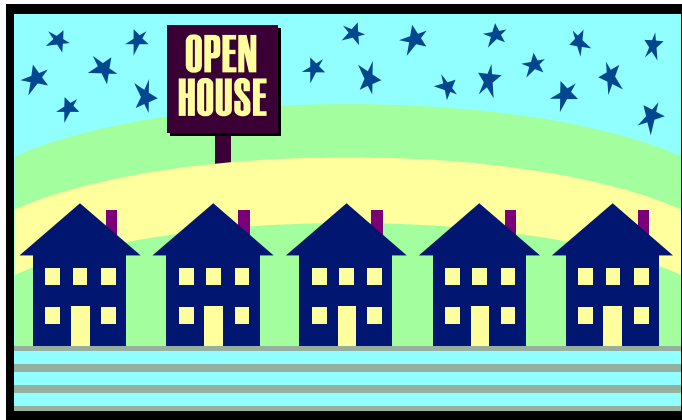
Legislative Changes

- Review of Background Summary Handout
 - Assembly Bill 100 (AB 100), Committee on Budget, Mental Health Services Act
 - Department of Health Care Services (DHCS), DMH, and Alcohol and Drug Programs (ADP) Medi-Cal transfer
 - AB 102, Committee on Budget, Health
 - AB 106, Committee on Budget, Human Services

What Does DMH Look Like Today?

Community Mental Health

Number of staff reduced
from 114 to 19 positions



DMH Functions Today

Financial Oversight								
Issue Resolution								
County Data Collection & Reporting								
Housing								
Suicide Prevention								
Student Mental Health Initiative								
Stigma & Discrimination								
Multicultural Services								
Caregiver Resource Centers								
Co-Occurring Disorders								
Veterans Mental Health								
Disaster Response								
Early Mental Health Initiative								
SAMSHA Block Grant								
PATH								
Workforce Education & Training								
Training Contracts								
Technical Assistance								
Access / Utilization								
Program Evaluation								
Compliance/ Quality Improvement								
Other _____								

Stakeholder Reflections

Stakeholder Reflections

- Based on today's presentation, what are the changes in mental health at the state level that stand out for you?

Guiding Principles for Input

MHSA General Standards

- Community Collaboration
- Client and Family Driven
- Cultural Competence
- Wellness, Recovery and Resilience Focused
- Integrated Services Experience

Guiding Principles for Stakeholder Input

- Improve access to culturally appropriate services
- Improve quality of care
- Improve state accountability and outcomes
- Improve efficiency and effectiveness of community mental health system
- Include realistic implementation strategies taking into consideration available resources
- Fulfill organizational/policy/legal/statutory responsibilities

Break-Outs

Tips for Participation

- Listen, don't worry about what you want to say and miss the good words of others.
- Don't repeat what has already been said. Share a brief sentence of support if you feel you need to say something.
- Write down your thoughts, read your statement, then offer your notes to the facilitator.

Break-Out Question #1

- Based on what you heard today, what opportunities do you see as a result of the transition at the state level?

Break-Out Question #2

Review Mental Health Functions Handout

- Which entity should assume responsibility for the functions/programs listed?
- What functions/programs are missing from the list?

Break-Out Question #3

- What do you believe are the challenges associated with the changes to mental health at the state level?
- How can these challenges be addressed?

Small Group Summary

Next Steps

What will come of this stakeholder process?

- Stakeholder comments and input will be compiled into a comprehensive report for DMH
- DMH will host a statewide webinar to report back to stakeholders on the themes from the Community Mental Health Stakeholder Meetings
- A summary of stakeholder input will be provided by DMH to the public in October 2011

Want To Know More?

- Please visit the Medi-Cal Transfer, Stakeholder Summer 2011 and Realignment Information webpage:

www.dmh.ca.gov

- Click on “Information Regarding the DHCS/DMH Medi-Cal Transfer, Summer Stakeholder, and Realignment” under the “What’s New?” section for meeting notices, information, and updates.

Social Media Updates

- **Facebook**

Visit the CA Community Mental Health Stakeholder page on Facebook

<http://www.facebook.com/pages/CA-Community-Mental-Health-Stakeholder/179811872085830>

- **Twitter**

Follow **CAMHStakeholder** on Twitter

Additional Comments?

- Send written comments to:

CommunityMHStakeholder@dmh.ca.gov

If you would like your comments to be posted on the DMH website, please indicate your permission in your email message.

Contact Information

CA Department of Mental Health

CommunityMHStakeholder@dmh.ca.gov